

| POSITION                  | INITIALS  | ID NO.       | DATE          |
|---------------------------|-----------|--------------|---------------|
| FEE DETERMINATION         | <i>DA</i> | <i>70591</i> | <i>11/3</i>   |
| O.I.P.E. CLASSIFIER       |           | <i>15</i>    | <i>2-1-00</i> |
| FORMALITY REVIEW          |           |              |               |
| RESPONSE FORMALITY REVIEW |           | <i>60874</i> | <i>7-5-00</i> |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ! ..... Restricted      O ..... Objected

| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions  
 staple additional sheet here

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